m

m

ŦIJ.

14

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. UTILITY Attorney Docket No.

PATENT APPLICATION TRANSMITTAL

First Inventor

U.S Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Express Mail Label No. (Only for new nonprovisional applications under 37 CFR 1 53(b)) Assistant Commissioner for Patents APPLICATION ELEMENTS ADDRESS TO: Box Patent Application Washington, DC 20231 See MPEP chapter 600 concerning utility patent application contents. Fee Transmittal Form (e.g., PTO/SB/17) CD-ROM or CD-R in duplicate, large table or (Submit an original and a duplicate for fee processing) Computer Program (Appendix) Applicant claims small entity status. 8. Nucleotide and/or Amino Acid Sequence Submission See 37 CFR 1.27. (if applicable, all necessary) specification [Total Pages 79] [
(preferred arrangement set forth below) 3. |√ Computer Readable Form (CRF) - Descriptive title of the invention Specification Sequence Listing on: - Cross Reference to Related Applications i. ☐ CD-ROM or CD-R (2 copies); or - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, ıi□ paper or a computer program listing appendix Statements verifying identity of above copies - Background of the Invention - Brief Summary of the Invention ACCOMPANYING APPLICATION PARTS - Brief Description of the Drawings (if filed) - Detailed Description Assignment Papers (cover sheet & document(s)) - Claim(s) 37 CFR 3.73(b) Statement Power of - Abstract of the Disclosure 10. (when there is an assignee) Attorney TNF61MAL
Drawing(s) (35 U.S.C. 113) [Total Sheets 5] English Translation Document (if applicable) 4 V Copies of IDS Information Disclosure 5. Oath or Declaration [Total Pages [] Citations Statement (IDS)/PTO-1449 Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 17 completed) a. Preliminary Amendment b. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) DELETION OF INVENTOR(S) Certified Copy of Priority Document(s) (if foreign priority is claimed) 15. Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 16. Other: 1.63(d)(2) and 1 33(b). Application Data Sheet. See 37 CFR 1.76 17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment. or in an Application Data Sheet under 37 CFR 1.76: of prior application No. ____ Continuation Divisional Continuation-in-part (CIP) Prior application information: Group / Art Unit: _ For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 18. CORRESPONDENCE ADDRESS Customer Number or Bar Code Labei Correspondence address below (Insert Customer No. or Attach bar code label here) A. LEHMAN Name BOX 373 Address City W LAC 54936 State W/1 Zip Code Country 920-921-3464 (MONE) Telephone AMES . LEHMAN Name (Print/Type) Registration No. (Attorney/Agent) ehman amer Sianature Date JULY 18, 2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents, Box Patent Application Washington, DC 20231

In the United States Patent and Trademark Office

	Mailed
Commissioner of Patents and Trademarks Washington, District of Columbia 20231	
Sir:	
Please file the following enclosed patent application p	papers:
Applicant #1, Name: JAMES A. LEHM	AAN
Applicant #2, Name:	
Title: PIONER METHODS. AND WEBENABLES LIST OR NON LIST, ON THE INTERNET OF Specification, Claims, and Abstract: Nr. of Sheets	O APPARATUSES, FOR USING ANY KIND OF CO OR THTRONGT LING MEANS TO CREATE OR INVE 79
図 Declaration: Date Signed: JULY 18, 2001	· · · · · · · · · · · · · · · · · · ·
☑ Drawing(s): Nr. of Sheets Enc.: (In Triplicate): Form	mal: Informal:5
☐ Small Entity Declaration Of Inventor(s) ☐ SED of	of Non-Inventor / Assignee/Licensee
☐ Assignment; please record and return; recordal fee	e enclosed.
☑ Check for \$ <u>355. 0</u> for:	
	ee independent claims and twenty total claims are
\$ Additional if Assignment is enc	closed for recordal.
▼ Return Receipt Postcard Addressed to Applicant #	11. 157000 0600 0029 1610 3830 CRRTIFIED MAIL
Request Under MPEP § 707.07(j): The under if the Examiner finds patentable subject matter disc	rsigned, a pro-se applicant, respectfully requests tha
Very respectfully, James A. Lehman	
Applicant #1 Signature	Applicant #2 Signature
Address (Send Correspondence Here) P. D B O X 373, FOND W LALLM 54936	Address
Express Mail Label #	; Date of Deposit 199
I hereby certify that this paper or fee is being deposite "Express Mail Post Office To Addressee" service unde addressed to "Commissioner of Patents and Trademar	r 37 CFR 1.10 on the date indicated above and is
Signed:	

Inventor

PTO/SB/17 (09-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
a collection of information unless it displays a valid OMB control number Under the Paperwork Reduction Act of 1995, no persons are required to res

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL	AMOUN	エヘロロ	AVMENT

ound to a conjection of information diffess it displays a valid OMB control number.				
Complete if Known				
Application Number				
Filing Date				
First Named Inventor				
Examiner Name				
Group Art Unit				
Attorney Docket No.				

METHOD OF PAYMENT FEE CALCULATION (continued)					
1. The Commissioner is hereby authorized to charge 3. ADDITIONAL FEES					
Deposit Deposit	Large Entity Small Entity Fee Fee Fee Fee Fee Fee Fee Fee Description Code (%) Code (%) Cod	Fan Daid			
Account Number	code (4) code (4)	Fee Paid			
Deposit	105 130 205 65 Surcharge - late filing fee or oath				
Account Name	127 50 227 25 Surcharge - late provisional filing fee or cover sheet				
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	139 130 139 130 Non-English specification				
Applicant claims small entity status.	147 2,520 147 2,520 For filing a request for ex parte reexamination				
See 37 CFR 1 27 2. Payment Enclosed:	112 920* 112 920* Requesting publication of SIR prior to Examiner action				
Check Credit card Money Order Other	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action				
FEE CALCULATION	115 110 215 55 Extension for reply within first month				
1. BASIC FILING FEE	116 390 216 195 Extension for reply within second month				
Large Entity Small Entity	117 890 217 445 Extension for reply within third month				
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	118 1,390 218 695 Extension for reply within fourth month				
404 740 004 053 11151 55 /	128 1,890 228 945 Extension for reply within fifth month				
101 710 201 355) Utility filing fee	119 310 219 155 Notice of Appeal				
107 490 207 245 Plant filing fee	120 310 220 155 Filing a brief in support of an appeal				
108 710 208 355 Reissue filing fee	121 270 221 135 Request for oral heaning				
114 150 214 75 Provisional filing fee	138 1,510 138 1,510 Petition to institute a public use proceeding				
	140 110 240 55 Petition to revive - unavoidable				
SUBTOTAL (1) (\$)	141 1,240 241 620 Petition to revive - unintentional				
2. EXTRA CLAIM FEES Fee from	142 1,240 242 620 Utility issue fee (or reissue)				
Ext <u>ra Claims below</u> Fee Paid	143 440 243 220 Design issue fee				
Total Claims 20 -20** = X = =	144 600 244 300 Plant issue fee				
Independent Claims - 3** = X =	122 130 122 130 Petitions to the Commissioner				
Multiple Dependent =	123 50 123 50 Petitions related to provisional applications				
Laws Faths a superior	126 240 126 240 Submission of Information Disclosure Stmt				
Large Entity Small Entity Fee Fee Fee Fee Description Code (\$) Code (\$)	581 40 581 40 Recording each patent assignment per property (times number of properties)				
103 18 203 9 Claims in excess of 20	146 710 246 355 Filing a submission after final rejection (37 CFR § 1.129(a))				
102 80 202 40 Independent claims in excess of 3	149 710 249 355 For each additional invention to be				
104 270 204 135 Multiple dependent claim, if not paid	examined (37 CFR § 1.129(b))				
109 80 209 40 ** Reissue independent claims over original patent	179 710 279 355 Request for Continued Examination (RCE)				
110 18 210 9 ** Reissue clarms in excess of 20 and over original patent	169 900 169 900 Request for expedited examination of a design application				
SUBTOTAL (2) (\$)	Other fee (specify)				
**or number previously paid, if greater; For Reissues, see above Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)					

Complete (if applicable) Registration No. (Attorney/Agent) Name (Print/Type) LEHMAN Telephone 920-921-3464 Signature shman JULY 18,2007

> WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO. Assistant Commissioner for Patents, Washington, DC 20231.

Certificate of Mailing under 37 CFR 1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

- CERTIFIRA:

7000 0600 0029 1610 3830

Assistant Commissioner for Patents Washington, D.C. 20231

on JULY 18, 2001

Date

Signature

JAMES A. LEHMAN

Typed or printed name of person of signing Certificate

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.